



State of Connecticut

Department of Public Safety / Division of State Police

State Police Troop: K - Colchester

ACCIDENT INFORMATION SUMMARY

Case Number: DPS-04-055833

Notations:

 Traffic: L
 Weather: Clear
 Lane: of
 Direction of Travel:
 N S E W
Investigating Trooper: Kilcomons #579Date: 11/8/04Time: 0607
 No. & Type of Veh's Involved: 4 car
 (Passenger Car, Truck, Bus, Etc.)

 Related Information: Guardrail
 (Pedestrian, Pole, Bridge Abutment, Etc.)
Town / City: LebanonLocation of Accident: Rt. 289

Utility Pole Name & Number (If Applicable):

Other (Specify):

Oper #1: Palmer, Raymond A JrOper #2: Owen, Timothy DDOB: 8/21/47 Gender: ☒ M ☐ FDOB: 10/26/76 Gender: ☒ M ☐ FAddress: 76 Colchester CommonsAddress: 149 Ashford Ctr RoadTown: Colchester State: CT Zip: 06415Town: Ashford State: CT Zip: 06278Oper. Lic. # 082688284 Type: 2 State: CTOper. Lic. # 226612617 Type: 2 State: CTOwner #1: sameOwner #2: same

Address:

Address:

Registration Plate: 842-PDJ State: CTRegistration Plate: 3CB110 State: CTMake: SAAB Model: 90S Year: 1997Make: Ford Model: F-250 Year: 1990VIN: YS3DD35B3V2038795VIN: 2FTHF26M6LCB40140Seatbelt(s): ☒ Yes ☐ No Airbag: ☒ Yes (Deployed ☐ Y ☐ N) ☐ No ☐ N/ASeatbelt(s): ☒ Yes ☐ No Airbag: ☐ Yes (Deployed ☐ Y ☐ N) ☒ No ☐ N/AInsurance Company: AMEX Assurance Co.Insurance Company: GeicoInsurance Policy #: AX00202152Insurance Policy #: 0585-75-68Injuries: minorInjuries: noneVehicle Damage: Heavy left frontVehicle Damage: left rearVehicle Towed: ☐ No ☒ Yes, Desmond'sVehicle Towed: ☐ No ☒ Yes, Raymond's

Occupant(s): [Name / DOB / Address / Position in Veh]

Occupant(s): [Name / DOB / Address / Position in Veh]

N/AN/AOper #3: Gonzalez, Marco P.Oper #4: Gutierrez, Jose R.DOB: 4/25/82 Gender: ☒ M ☐ FDOB: 3/23/74 Gender: ☒ M ☐ FAddress: 340 Pleasant St #5Address: 146 Chapman St 1LTown: Willimantic State: CT Zip: 06226Town: Willimantic State: CT Zip: 06226Oper. Lic. # None Type: State:Oper. Lic. # None Type: State:Owner #3: Ortiz, Miguel AOwner #4: Benway, NancyAddress: 920 Riverside Dr A8 Willimantic, CTAddress: PO Box 523 Norwich, CTRegistration Plate: 202-SPG State: CTRegistration Plate: 6CR103 State: CTMake: Ford Model: Tempo GL Year: 1993Make: Chevrolet Model: C1500 Year: 1994VIN: 1FAPP36X7PK196491VIN: 2GCEC19H5R1141031Seatbelt(s): ☐ Yes ☐ No Airbag: ☐ Yes (Deployed ☐ Y ☐ N) ☒ No ☐ N/ASeatbelt(s): ☒ Yes ☐ No Airbag: ☐ Yes (Deployed ☐ Y ☐ N) ☒ No ☐ N/AInsurance Company: unknownInsurance Company: none

Insurance Policy #:

Insurance Policy #:

Injuries: DeceasedInjuries: noneVehicle Damage: Heavy left front & sideVehicle Damage: minor left frontVehicle Towed: ☐ No ☒ Yes, Fitchville AutoVehicle Towed: ☐ No ☒ Yes, Desmond's

Occupant(s): [Name / DOB / Address / Position in Veh]

Occupant(s): [Name / DOB / Address / Position in Veh]

Gonzalez, Renee/9-26-58/same as Op.#3/ RFNone

Brief Description of Accident

Vehicle #1 was traveling northbound on Rt. 289 in the town of Lebanon. Vehicles #2, 3, and 4 were traveling southbound on Rt. 289. Vehicle #3 passed several vehicles over the double yellow center line. As Vehicle #3 was passing Vehicle #2, Vehicle #3 struck Vehicle #1 head-on. Vehicle #3 then struck Vehicle #2 causing Vehicle #2 to skid off the left side of the roadway striking a guardrail. Vehicle #4 then struck Vehicle #3 with the left front of Vehicle #4.

This investigation is: ☐ Open / Continuing ☐ Closed

MEDICAL ATTENTION:

#1 Ambulance ☒ Yes, Company Lebanon ☐ No
Patient Name: Palmer, Raymond
Hospital: Windham Hosp.
Injuries: minor

#2 Ambulance ☒ Yes, Company Windham ☐ No
Patient Name: Owen, Timothy
Hospital: Windham Hosp.
Injuries: none

#3 Ambulance ☒ Yes, Company Lebanon ☐ No
Patient Name: Gonzalez, Marco P.
Hospital: Windham Hosp.
Injuries: Fatal

#4 Ambulance ☒ Yes, Company Lifestar ☐ No
Patient Name: Gonzalez, Renee
Hospital: Backus Hosp.
Injuries: Broken wrist/arm

FATALITIES: Do Not Release Unless Next of Kin Notified

Name Gonzalez, Marco P.
Next of Kin Notified? ☒ Yes ☐ No
Name _____
Next of Kin Notified? ☐ Yes ☐ No

Name _____
Next of Kin Notified? ☐ Yes ☐ No
Name _____
Next of Kin Notified? ☐ Yes ☐ No

ENFORCEMENT ACTION:

Arrested Under Investigation
Warned _____

Arrested _____
Warned _____

Supervisor's Approval Required: Signature _____

JF

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Date 11/8/04